

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MARYLAND**

\_\_\_\_\_  
Plaintiff

vs.

\_\_\_\_\_  
Defendant

\*

\* Civil Action No. \_\_\_\_\_

\*

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**MOTION FOR LEAVE TO PROCEED IN FORMA PAUPERIS**

Plaintiff hereby requests leave, pursuant to 28 U.S.C. §1915, to proceed “*in forma pauperis*”  
(without prepayment of costs). In support of this motion, plaintiff attaches an affidavit.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (Print or Type)

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State/Zip

\_\_\_\_\_  
Phone No.

\_\_\_\_\_  
Fax No.

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF MARYLAND**

\_\_\_\_\_  
Plaintiff

vs.

\_\_\_\_\_  
Defendant

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\* Civil Action No. \_\_\_\_\_

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**AFFIDAVIT IN SUPPORT OF MOTION FOR LEAVE TO PROCEED  
IN FORMA PAUPERIS**

I, \_\_\_\_\_, declare that I am the plaintiff in the above-entitled case. I understand that the filing fee for most civil suits is \$250.00. In support of my motion to proceed without being required to prepay the filing fee and other costs, I state that: (1) because of my poverty I am unable to pay such fee and costs, or give security therefor; and (2) I believe I am entitled to relief in this proceeding. The nature of my complaint is briefly stated as follows (employment discrimination, Social Security, civil rights, or other):

In further support of this motion, I answer the following questions:

1. Are you presently employed?

' Yes    ' No

a. If the answer is "yes," state the amount of your salary or wages per month, and give the name and address of your employer. List both gross and net (take-home) pay.

Employer: \_\_\_\_\_ Monthly Gross: \$ \_\_\_\_\_

\_\_\_\_\_ Monthly Net: \$ \_\_\_\_\_

- b. If the answer is "no," state the date of last employment, the name and address of your employer, and the amount of salary or wages per month you received.

Date: \_\_\_\_\_

Employer: \_\_\_\_\_ Monthly Gross: \$ \_\_\_\_\_

\_\_\_\_\_ Monthly Net: \$ \_\_\_\_\_

2. Have you received within the past 12 months any income from: (1) settlements, judgments, or monetary awards following compensation, or disability payments; (2) Social Security, public assistance, workers' compensation, or disability payments; (3) a business, profession or other form of self-employment; (4) rent payments, interest, or dividends; (5) retirement, annuity, pension or insurance payments; (6) gifts or inheritances; or (7) any other sources?

' Yes ' No

Received:

Source:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Do you expect this income to continue: ' Yes ' No

3. Do you have any cash on hand, or money in savings or checking accounts? ' Yes ' No

If yes, state total amount: \$ \_\_\_\_\_

4. Do you own or have any interest in any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? ' Yes ' No

If yes, give value and description:

Value:

Description:

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

\$ \_\_\_\_\_

5. List creditors, including banks, mortgage companies, charge accounts, etc.:

| <u>Creditors:</u> | <u>Total Debt:</u> | <u>Monthly Payment:</u> |
|-------------------|--------------------|-------------------------|
| _____             | \$ _____           | \$ _____                |
| _____             | \$ _____           | \$ _____                |
| _____             | \$ _____           | \$ _____                |
| _____             | \$ _____           | \$ _____                |

6. List any major monthly expenditures not included in your answer to No. 5, such as food, insurance, utilities, rent, child support, alimony, etc.:

| <u>Description:</u> | <u>Monthly Payment:</u> |
|---------------------|-------------------------|
| _____               | \$ _____                |
| _____               | \$ _____                |
| _____               | \$ _____                |
| _____               | \$ _____                |

7. Marital Status: ' Single ' Married ' Widowed ' Separate/Divorced

List Persons you actually support and your relationship to them:

| <u>Name:</u> | <u>Relationship:</u> |
|--------------|----------------------|
| _____        | _____                |
| _____        | _____                |
| _____        | _____                |
| _____        | _____                |

8. If married, is your spouse employed? ' Yes ' No

If yes, how much does your spouse earn per month: Gross: \$ \_\_\_\_\_ Net: \$ \_\_\_\_\_

9. If you are a minor under age 18, what is your parents' or guardian's approximate monthly income?

Gross: \$ \_\_\_\_\_ Net: \$ \_\_\_\_\_

I understand the Court will not consider my Motion unless all the questions are answered.

I declare under penalty of perjury that the information above is true and correct.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature